	PATENT	APPLICATIO Effect		0/7/3415										
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTRY OTHER THAI						
TOTAL CLAIMS			34					RATE		FEE	]	RATE	F	EE
FOR			NUMBER FILED		NUMBER EXTRA		ZA.	BASIC	FEE	385.00	OR	BASIC FEE	EE 770.00	
TOTAL CHARGEABLE CLAIMS			うく minus 20=		• 14			X\$ 9			OR	X\$18=	252	
INDEPENDENT CLAIMS			u minus 3 =		1			X43≂			OR	X86=	= R	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT				+145=				+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2							2	TOTAL			OR	TOTAL		
) CLAIMS AS AMENDED - PART II								1012	, L		Un	OTHER	TH	M
(Column 1) (Column 2) (Column 3)						ın 3)	SMALL ENTITY OR SMALL ENTITY							
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	ļ	HIGH NUME PREVIO PAID I	BER	PRESE		RATE	•	ADDI- TIONAL FEE		RATE	TIC	DI- NAL ÉE
	Total	.34	Minus	~~3	4	- I		X\$ 9			OR	X\$18=		
ME	Independent	. 4	Minus	***	4_	-		X43=	. ]	1	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								士	$\top$		.000		
	1 11-21 -01							+145	_1_		OR	+290=	$\dashv$	
1	8 19/07		41/5					ADDIT. F		+	OR ,	ADDIT. FEE	4	
AMENDMENT B	) (Column 1) PO/ C (Column 2) (Column 3)  CLAIMS HIGHEST								_	ADDI-	1		Δſ	DI-
		REMAINING NUMBER PRESEN AFTER PREVIOUSLY EXTRA AMENDMENT PAID FOR			RATE		TIONAL FEE		RATE	TIO	NAL EE			
	Total	.34	Minus	<del>-</del> 3	4			X\$ 9:			OR	X\$18=		
	Independent	. 4	Minus	••• (	<u>(                                     </u>	<u> </u>		X43=			OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145:	.	·	OR	+290=		
								TOT				TOTAL		
									EE L		OR	ADDIT. FEE		
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST									ADDI	. 1		AF	
AMENDMENT C		REMAINING AFTER AMENDMENT		, NUME PREVIO PAID (	USLY	PRESE		RATE		ADDI- IONAL FEE		RATE	TIO	)DI- NAL EE
	Total .	•	Minus	<b>64</b>		<b>-</b> .	].[	X\$ 9=			OR	X\$18=		
	independent	•	Minus	400		•		X43=	十		OR	X86=		
	FIRST PRESE	NTATION OF MI	JUTIPLE DEF	ENDENT	CLAIM		┷	+145=	十					
• 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
Total of the Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE OF ADDIT. FEE OF TOTAL ADDIT. FEE														
		ber Previously Pai						ind in the	appro	priate box	in cot	ymn 1,		

Application or Docket Number